

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | JK | 835 | 04/16/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral) Canceled A Appeal
 - Restricted O Objected

| Claim | Date | Claim | Date | Claim | Date |
|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original |
| 1 | 10/3/00 | 1 | 10/3/00 | 101 | |
| 2 | 10/17/00 | 2 | 10/17/00 | 102 | |
| 3 | | 3 | | 103 | |
| 4 | | 4 | | 104 | |
| 5 | | 5 | | 105 | |
| 6 | | 6 | | 106 | |
| 7 | | 7 | | 107 | |
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| 14 | | 14 | | 114 | |
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| 24 | | 24 | | 124 | |
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| 37 | | 37 | | 137 | |
| 38 | | 38 | | 138 | |
| 39 | | 39 | | 139 | |
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| 41 | | 41 | | 141 | |
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| 45 | | 45 | | 145 | |
| 46 | | 46 | | 146 | |
| 47 | | 47 | | 147 | |
| 48 | | 48 | | 148 | |
| 49 | | 49 | | 149 | |
| 50 | | 50 | | 150 | |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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